24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	nL3	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
American College of Radiology Association PAC		C C00343459
Check if Z 24-hour report 48-hour report New report Amends report filed on		
Full Name of Payee Majority Strategies	Date	e of Public Distribution/Dissemination
Mailing Address 135 Professional Drive, Suite 104	Amo	10 17 2014 ount
City State Zip Ponte Vedra Beach FL 320		69624.64 nsaction ID : D162261 e of Disbursement or Obligation
Purpose of Expenditure Printed advertising for mailing	tegory/ Type	10 17 2014
Name of Federal Candidate	Support Office Sou	ght: X House District: 06
Rep. Fred Upton		ident Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 9704	Disbursem 2014	ent For:
Full Name of Payee Majority Strategies	Dat	e of Public Distribution/Dissemination
Mailing Address 135 Professional Drive, Suite 104 Amount		
City State Zip	Code	27420.20
Ponte Vedra Beach FL 320)82 Tran	e of Disbursement or Obligation
Purpose of Expenditure Internet Ad Ca	tegory/ Type	10 17 2014
Name of Federal Candidate	Support Office Sou	ight: X House District: 06
Rep. Fred Upton		sident Senate State: MI
Calendar Year-To-Date Per Election for Office Sought	Disbursem 2014	ent For:
(a) SUBTOTAL of Itemized Independent Expenditures		
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Richard Taxin MD [Electronically Filed] Date 10 17 2014		
Signature		